

held in the hand". This is not such a one: perhaps it is a *handbuch* in the German style, which is practically an encyclopaedia. It is a substantial book for the bench or desk of the supervisor of radiation hygiene (ugh!).

No matter how much one may deplore in England, Germano-Americanization of the English language, nevertheless it must be admitted that there is no work comparable to this published in the United Kingdom. To a certain extent this is a pity. On the other hand no one is likely to consult such a bible to gain inspiration from its prose. Its purpose is to give facts and figures to the practical man. Like the "handbook" produced for the engineer its virtue is in its tables. It starts with "Reference Data" (43 pp.)—the periodic table, logarithms, fundamental constants, etc., passes through a glossary of Terms" (22 pp.) to "Exposure Standards and Radiation Protection Regulations" (72 pp.)—of value in the U.S.A. but not universally. The following twenty sections vary from Laboratory Design (12 pp.) to Sources of Radiation (190 pp.). Obviously one gets only some basic principles of Laboratory Design but Sources of Radiation gives plenty about naturally radioactive elements and ores, particle accelerators, X-ray machines, nuclear reactors and then radioactive isotopes from ${}^1_0\text{n}$ (!) to ${}^{98}_{44}\text{Cr}^{246}$.

There are chatty sections on Natural Radioactive Background (18 pp.), Ionizing Radiation (14 pp.), Interaction of Radiation with Matter (13 pp.) which are basic physics plus some useful tables (which may require verification) and graphs.

There are practical sections on Radiation Detection and Measurements (184 pp.), Industrial Applications (52 pp.), Research Applications (26 pp.), even Medical Radiation Applications (30 pp.) and Determination of Exposures (19 pp.). Nuclear Safety, which is really the discussion of critical assemblies which history shows are responsible for lethal accidents is given 11 pp. (Either ten times as much or nothing would have been more logical.) Radiation Hygiene Chemistry (24 pp.) ("commonly called health biochemistry") describes the practice of measuring radioactive nucleides in biological fluids or tissue, but not how to interpret

the results. Equipment for Handling, Storage and Transportation of Radioactive Materials (36 pp.), Surface Contamination and Decontamination (23 pp.), Sampling Equipment (Dust Gases and Liquids) (31 pp.), Liquid and Solid Waste Disposal (63 pp.), and Control of Radioactive Air Pollution (45 pp.) are eminently practical chapters and Radiation Attenuation Data (69 pp.) invaluable.

Presumably Physiological Effects of Radiation (17 pp.) was called for because of the handbook's title but one cannot imagine its being of use to the physician (too short) or to the engineer (too alarming). Personnel Control (15 pp.) is again too brief for the physician and not really suitable material for a "handbook".

This work is a "must" as a book of reference for the library and for selected people whose day-to-day exercises involve the use of "data" such as the handbook is designed to list. At £10 13s. 0d. it is a book which no individual buys for his own use: he demands his employer to supply it.

J. F. LOUTIT

MENTAL ILLNESS

Myers, Jerome K. and Roberts, Bertram H. *Family and Class Dynamics in Mental Illness*. New York, 1959. Wiley. (London, Chapman and Hall.) Pp. xi + 295. Price 56s.

IN AN IMPRESSIVE monograph, Professors Hollingshead and Redlich communicated the results of their inquiry into the social class of mentally ill persons in New Haven and its relation to the treatment they received (EUGENICS REVIEW. 1959. 50, 4, 266). In the present work two collaborators in the investigation, again a sociologist and a psychiatrist, report what they found when they tried to determine how far social class influences the form and details of mental illness. From the group of treated patients collected by Hollingshead and Redlich they selected fifty persons of whom twenty-five were schizophrenics and twenty-five were neurotic: half of each of these groups came from Social Class III and half from Social Class V (as defined by Hollingshead). All the fifty subjects were intensively studied by a social investigator who collected from at least two members of the patient's family information

about his development and social background; two psychiatrists examined each of the patients, one working systematically to obtain information for an extensive schedule, the other proceeding along less comprehensive clinical lines; and one of the investigators asked the psychiatrists who had treated the patients, how in each case the treatment had progressed and what had been the reciprocal relation between them and the patient.

Their findings support the hypothesis that social and psychodynamic factors in the development of psychiatric disorders correlate with an individual social class: among these factors were relationships within the family, sexual development, external pressure from the community, attitudes to mental illness, and pattern of symptoms. They also found, not surprisingly, that stresses had occurred more frequently and more intensely among the schizophrenic than among the neurotic patients. A hypothesis relating social mobility to the development of mental disorder was partially confirmed, upward striving being evident in Class III but not in Class V.

The authors are well aware of the limitations of their study and rightly point out that it has raised more questions than it has answered. Suggesting lines of further research, they put the chief emphasis on psychodynamic factors operating within the family. They are not, however, unmindful of the multiplicity of causes nor of the particular role that heredity may play. "Such [constitutional] factors may have been responsible for the shy and withdrawn personalities of the schizophrenic patients we studied. On the other hand, the way such persons are treated by others may be a factor in determining if and when inherent tendencies develop. Perhaps, less external pressure is necessary for the development of psychiatric disorders among persons endowed with certain constitutional weaknesses. Or, organic predispositions may develop differentially into clinical illness under varying social and interpersonal conditions."

HILDA LEWIS

SOCIOLOGY

Kahn, Alfred J. (Editor). *Issues in American Social Work*. New York, 1959. Columbia

University Press. (London, Oxford University Press.) Pp. xii + 354. Price 40s.

AMERICAN SOCIAL WORK at the present day is again reviewing its goals and methodology. Its history is of interest not only to social workers but also to sociologists. It is probably no accident that social casework, as a method of helping people in trouble has developed more intensively in the United States than anywhere else. Social workers from all over the world come to study casework in American universities and American case records are studied in many countries as a means of training social workers in casework. "Helping people to help themselves", often given as a definition of casework was a natural form for social work to take in a new country where so many of those coming to social work agencies for assistance were immigrants. There was also, however, much insistence on the need for social action in relation to such evils as bad housing, overcrowding, unemployment and the exploitation of immigrant labour. A good deal of concern was expressed from time to time that the developing social work profession should be so absorbed in casework. Thus, Mary Richmond whose classic social work text, *Social Diagnosis* (1917), laid the scientific basis of the new profession is reported to have said that having spent twenty-five years of her life attempting to get social casework accepted as a valid process in social work, she would spend the rest of it trying to demonstrate to social caseworkers that there is more to social work than social casework. Edith Abbott, the great pioneer of social work education in Chicago declared in 1928 that graduates were not being prepared as social workers but as narrow practitioners, "who have become so concerned about casework methods and such phenomena as the ego, libido, and various psychiatric diagnoses, and such exigencies as community chest campaigns that they have lost their sense of responsibility for public welfare". When one adds to this that the Hollis-Taylor Report on *Social Work Education in the United States* (1951) was also highly critical of the over-emphasis on casework and recommended that the profession should, "devise and use a more inclusive concept of social work", it is perhaps somewhat disquieting to find that in this new volume of papers by